

<div>ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>):</div> <div>TELEPHONE NO.:FAX NO. (<i>Optional</i>):</div> <div>E-MAIL ADDRESS (<i>Optional</i>):</div> <div>ATTORNEY FOR (<i>Name</i>):</div>		<div>FOR COURT USE ONLY</div>
<div>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</div> <div>STREET ADDRESS:</div> <div>MAILING ADDRESS:</div> <div>CITY AND ZIP CODE:</div> <div>BRANCH NAME:</div>		
<div>PLAINTIFF/PETITIONER:</div> <div>DEFENDANT/RESPONDENT:</div>	CASE NUMBER:	
	DEPT.:	
<div>NOTICE OF TERMINATION OR MODIFICATION OF STAY</div>	JUDICIAL OFFICER:	

To the court and all parties:

1. A *Notice of Stay of Proceedings* was filed in this matter on (date):
 2. Declarant named below is
 - a. ☐ the party ☐ the attorney for the party who requested or caused the stay.
 - b. ☐ other (describe):
 3. ☐ The stay described in the above referenced *Notice of Stay of Proceedings*
 - a. ☐ has been vacated by an order of another court. (Attach a copy of the court order.)
 - b. ☐ is no longer in effect.
 4. ☐ The stay has been modified (describe):
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-
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-
5. The stay has been vacated, is no longer in effect, or has been modified
 - a. ☐ with regard to all parties.
 - b. ☐ with regard to the following parties (specify by name and party designation):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME OF DECLARANT)

(SIGNATURE OF DECLARANT)

PLAINTIFF:	CASE NUMBER:
DEFENDANT:	

**PROOF OF SERVICE BY FIRST-CLASS MAIL
NOTICE OF TERMINATION OR MODIFICATION OF STAY**

(NOTE: You cannot serve the Notice of Termination or Modification of Stay if you are a party in the action. The person who served the notice must complete this proof of service.)

1. I am at least 18 years old and **not a party to this action**. I am a resident of or employed in the county where the mailing took place, and my residence or business address is *(specify)*:

2. I served a copy of the *Notice of Termination or Modification of Stay* by enclosing it in a sealed envelope with postage fully prepaid and *(check one)*:
 - a. ☐ deposited the sealed envelope with the United States Postal Service.
 - b. ☐ placed the sealed envelope for collection and processing for mailing, following this business's usual practices, with which I am readily familiar. On the same day correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service.

3. The *Notice of Termination or Modification of Stay* was mailed:
 - a. on *(date)*:
 - b. from *(city and state)*:

4. The envelope was addressed and mailed as follows:

<ol style="list-style-type: none"> a. Name of person served: Street address: City: State and zip code: b. Name of person served: Street address: City: State and zip code: 	<ol style="list-style-type: none"> c. Name of person served: Street address: City: State and zip code: d. Name of person served: Street address: City: State and zip code:
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☐ Names and addresses of additional persons served are attached. *(You may use form POS-030(P).)*

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME OF DECLARANT)

▶

(SIGNATURE OF DECLARANT)